

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<u>Daniel</u>		09-10-01
O.I.P.E. CLASSIFIER		53	9/27/01
FORMALITY REVIEW	1n	SC 864	10/16/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
Final	10/16/01
Original	
1	✓ ✓ ✓
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25	✓ ✓ ✓
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If more than 150 claims or 10 actions  
staple additional sheet here

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